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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No.	:	10/629,824	Confirmation No.:	7296
Applicant	:	DOUK		
Filed	:	July 30, 2003		
TC/A.U.	:	3763		
Examiner	:	AHMED, Aamer S.		
Docket No.	:	P1354		
Customer No.	:	28390		
Title	:	ASPIRATION CATHETER HAVING A VARIABLE OVER-THE-WIRE LENGTH AND METHODS OF USE		

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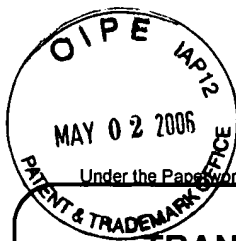
**AMENDMENT AFTER FINAL**

Sir:

In response to the final office action mailed March 23, 2006, please amend the above-identified application as set forth below. Favorable consideration and entry of this amendment is respectfully requested.

**Amendments to the Claims** are reflected in the listing of claims begin on page two (2) of this paper.

**Remarks/Arguments** begin on page seven (7) of this paper.



AF  
IFW

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/629,824
	Filing Date	July 30, 2003
	First Named Inventor	DOUK, Nareak
	Art Unit	3763
	Examiner Name	AHMED, Aamer S.
Total Number of Pages in This Submission	Attorney Docket Number	P1354

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Medtronic Vascular, Inc.		
Signature			
Printed name	James F. Crittenden		
Date	April 27, 2006	Reg. No.	39,560

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Signature			
Typed or printed name	Claire R. Lynch	Date	April 27, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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